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CONFIRMATION NO. 4694

SERIAL NUMBER 10/047,586	FILING DATE 10/29/2001 RULE	CLASS 030	GROUP ART UNIT 3724	ATTORNEY DOCKET NO. 5788-01001		
APPLICANTS Edwin E. Suer, Livonia, MI; Scott McGillivray, Sterling Heights, MI;						
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/243,775 10/27/2000						
** FOREIGN APPLICATIONS ***** <i>NONE</i>						
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/06/2002						
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>ja</i>	STATE OR COUNTRY MI	SHEETS DRAWING 6	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
ADDRESS Dinnin & Dunn, P.C. Top of Troy Building 755 West Big Beaver Road Troy, MI 48084						
TITLE Hot dog slicer						
FILING FEE RECEIVED 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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** CONTINUING DATA ***** This appln claims benefit of 60/243,775 10/27/2000					
** FOREIGN APPLICATIONS *****					
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MI	SHEETS DRAWING 6	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
ADDRESS DINNIN & DUNN PC 2701 CAMBRIDGE CT SUITE 500 AUBURN HILLS ,MI 48326-2510					
TITLE Hot dog slicer					
FILING FEE RECEIVED 603	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		